

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

True Blue Florida

ADDRESS (number and street)

PO Box 141358

Check if different
than previously
reported. (ACC)

Orlando

FL

32814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00617696

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☒ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
08 11 2016

through

M M M / D D D / Y Y Y Y Y Y
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kitchens, James, T., ,

Type or Print Name of Treasurer

Signature of Treasurer

Kitchens, James, T., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 15 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

True Blue Florida

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 11 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	10163.68	
(c) Total Receipts (from Line 19)	59000.00	140850.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	69163.68	140850.00
7. Total Disbursements (from Line 31).....	69163.68	140850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

True Blue Florida

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
08		11		2016

To:

M M	/	D D	/	Y Y Y Y
09		30		2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

59000.00

140850.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

59000.00

140850.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

59000.00

140850.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

59000.00

140850.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

59000.00

140850.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6473.00	11534.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6473.00	11534.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	62690.68	129315.04
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	69163.68	140850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69163.68	140850.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	59000.00	140850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59000.00	140850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	6473.00	11534.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	6473.00	11534.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

True Blue Florida

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Colling, Nancy, , ,

Mailing Address 50 Cypress Lane

City

Maitland

State

FL

Zip Code

32751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. South Central Florida Express, Inc.

Mailing Address 900 South W.C. Owen Avenue

City

Clewiston

State

FL

Zip Code

33340

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wolf, Jonathan, , ,

Mailing Address 149 Harston Ct.

City

Heathrow

State

FL

Zip Code

32746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wendover Housing

Occupation (for Individual)

Partner

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2016

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

5500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

True Blue Florida

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Women for Florida

Mailing Address 128 Westmoreland Circle.

City
Heathrow

State
FL

Zip Code
32746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19000.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period

19000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Women for Florida

Mailing Address 128 Westmoreland Circle.

City
Heathrow

State
FL

Zip Code
32746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

32000.00

Date of Receipt

08 / 19 / 2016

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period

13000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Women for Florida

Mailing Address 128 Westmoreland Circle.

City
Heathrow

State
FL

Zip Code
32746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

37000.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.4187

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

True Blue Florida

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Women for Florida

Mailing Address 128 Westmoreland Circle.

City
HeathrowState
FLZip Code
32746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Women for Florida

Mailing Address 128 Westmoreland Circle.

City
HeathrowState
FLZip Code
32746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

53500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.4189

Amount of Each Receipt this Period

9500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

16500.00

TOTAL This Period (last page this line number only).....▶

59000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

True Blue Florida

Full Name (Last, First, Middle Initial)

A. Adkins & Associates, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Mailing Address 121 Alhambra Plaza
Suite 1209City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
Consulting Fees/Political Strategy

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB21B.4197

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BBandT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Mailing Address 355 Alhambra Cir #100

City
Coral GablesState
FLZip Code
33146Purpose of Disbursement
Bank Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

207.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BBandT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Mailing Address 355 Alhambra Cir #100

City
Coral GablesState
FLZip Code
33146Purpose of Disbursement
Bank Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

416.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2623.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

True Blue Florida

Full Name (Last, First, Middle Initial)

A. Metropolitan Research Services

Mailing Address 14353 Southwest 50th Street

City
MiamiState
FLZip Code
33175Purpose of Disbursement
Research

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4199

Amount of Each Disbursement this Period

3450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PD Consulting

Mailing Address 121 Alhambra Plaza

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
Polling

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3850.00

6473.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 14

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

True Blue Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Metropolitan Research Services

Nature of Debt (Purpose):

Research

Mailing Address 14353 Southwest 50th Street

City
MiamiState
FLZip Code
33175

Outstanding Balance Beginning This Period

3450.00

Transaction ID : SD10.4154

Amount Incurred This Period

0.00

Payment This Period

3450.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 12 OF 14
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) True Blue Florida				FEC IDENTIFICATION NUMBER ▼ C C00617696	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Adkins & Associates, Inc.				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 12 / 2016	
Mailing Address 121 Alhambra Plaza Suite 1209				Amount 5860.32	
City Coral Gables		State FL	Zip Code 33134	Transaction ID : SE.4135 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2016	
Purpose of Expenditure Direct Mail			Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Soto, Darren, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL	
Calendar Year-To-Date Per Election for Office Sought 72484.68				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Adkins & Associates, Inc.				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 16 / 2016	
Mailing Address 121 Alhambra Plaza Suite 1209				Amount 15520.76	
City Coral Gables		State FL	Zip Code 33134	Transaction ID : SE.4141 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 15 / 2016	
Purpose of Expenditure Direct Mail			Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Soto, Darren, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL	
Calendar Year-To-Date Per Election for Office Sought 88005.44				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				21381.08	
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Kitchens, James, T., ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 15 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 13 OF 14
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) True Blue Florida				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00617696 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input type="checkbox"/> Memo Item Adkins & Associates, Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2016							
Mailing Address 121 Alhambra Plaza Suite 1209				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24927.82</div>							
City Coral Gables		State FL		Zip Code 33134							
Purpose of Expenditure Direct Mail				Category/Type 004							
Name of Federal Candidate: <input type="checkbox"/> Support Soto, Darren, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL							
Calendar Year-To-Date Per Election for Office Sought 112933.26				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Adkins & Associates, Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2016							
Mailing Address 121 Alhambra Plaza Suite 1209				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10881.78</div>							
City Coral Gables		State FL		Zip Code 33134							
Purpose of Expenditure Direct Mail				Category/Type 004							
Name of Federal Candidate: <input type="checkbox"/> Support Soto, Darren, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL							
Calendar Year-To-Date Per Election for Office Sought 123815.04				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 35809.60</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 35809.60	(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 	(a) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 35809.60										
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 										
(a) TOTAL Independent Expenditures	▶ 										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Kitchens, James, T., ,</u>				Date MM / DD / YYYY 10 / 15 / 2016							

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 14
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) True Blue Florida				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00617696 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY														
Full Name of Payee <input type="checkbox"/> Memo Item Adkins & Associates, Inc.				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 26 / 2016										
Mailing Address 121 Alhambra Plaza Suite 1209				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>										
City Coral Gables		State FL		Zip Code 33134										
Purpose of Expenditure Radio Advertising/Production: 'Progressive'				Category/Type 004										
Name of Federal Candidate: <input type="checkbox"/> Support Soto, Darren, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL										
Calendar Year-To-Date Per Election for Office Sought 129315.04				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input type="checkbox"/> Memo Item Facebook				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2016										
Mailing Address 1601 Willow Road				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>										
City Menlo Park		State CA		Zip Code 94025										
Purpose of Expenditure Digital Advertising 'Song'				Category/Type 004										
Name of Federal Candidate: <input type="checkbox"/> Support Soto, Darren, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL										
Calendar Year-To-Date Per Election for Office Sought 124315.04				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px; text-align: right;">5500.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;">62690.68</td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	5500.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶		(a) TOTAL Independent Expenditures	▶	62690.68
(a) SUBTOTAL of Itemized Independent Expenditures	▶	5500.00												
(a) SUBTOTAL of Unitemized Independent Expenditures	▶													
(a) TOTAL Independent Expenditures	▶	62690.68												
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <i>Kitchens, James, T., ,</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 15 / 2016										